

**COUNTY OF CAMDEN
DEPARTMENT OF INSPECTIONS**

Building Permit Application

PERMIT NO.: _____

PERMIT ISSUED: _____

JOB COMPLETED: _____

WORKERS' COMPENSATION

VERIFICATION: _____

SUBMITTED: YES ___ NO ___

WIND ZONE: 110 ___

PERMIT FEES: Building _____ WaterTap _____ Sewer Service _____

HOMEOWNERS' RECOVERY FUND FEE: \$ _____

1) General Contractor _____ Phone # _____ Fax # _____

2) Owner _____ Phone # _____

3) Project Address _____ PIN # _____

Is this a corner lot: YES ___/NO ___ Does the property owner own abutting property? YES ___/NO ___

4) Lot width (frontage) _____ Lot depth (length) _____ Total _____

5) Type improvement: New ___ Addition ___ Remodel ___ Repair ___ Roofing ___ Siding ___
Moving ___ Sign ___ Demolition ___

Type of Occupancy/Proposed Use _____

6) Type Construction: Wood Frame _____ Masonry _____ Steel/Metal _____ Other _____

7) Total square footage of structure: _____ Dimensions: _____ X _____

8) Single family ___ Two family ___ Multi-family ___ Accessory Bldg. ___ Other ___

9) # of Bldgs. _____; # of Dwelling Units: _____; # of Off-street Parking Spaces _____
of Bathrooms: _____; # of Bedrooms: _____; Flood Zone Designation: _____

10) Utilities: Please Circle one:

Water: Public/Private _____ Sewer: Public/Health Dept Approval _____ Electric: Underground/Overhead
Amperage _____ Phase _____ Voltage _____

11) Estimated Cost Contractors License No. Phone No.

Building \$ _____

Electrical \$ _____

Plumbing \$ _____

Mechanical \$ _____

Sprinkler \$ _____

Public Utilities \$ _____

Total \$ _____

No work shall be covered or concealed until approved by an Inspector from the County Inspections Department. A floor plan, with all rooms and buildings indicated, shall be drawn on a site plan and submitted for approval with this application. The site plan shall show the **dimensions of the property, buildings, rooms, existing and proposed buildings** with existing or proposed set backs from the property lines, off-street parking spaces and any required landscaping buffer strips when applicable. Said plan shall be neat and show accurate dimensions.

REQUIRED INSPECTIONS:

- *1.) Footing and/or Under Slab Inspection (**PRIOR** to placement of concrete). Any required tie downs, rebar, dowels, etc., shall be in place at the time of inspection.
- 2.) Foundations: Walls and/or piers. (Leave footings uncovered for this inspection.)
- 3.) Floor framing (**PRIOR** to placement of sheathing). (Crawl space shall be properly graded for this inspection.)
- 4.) Wall and roof sheathing inspection **PRIOR** to covering. All required blocking shall be in place.
- 5.) Rough in for electrical, plumbing, mechanical and framing.
- 6.) Insulation.
- 7.) Suspended porch slab, **PRIOR** to concrete.
- 8.) Underground Electrical Services.
- 9.) Prefinal Inspection.
- 10.) Final Inspection and Electrical check.

NOTE: Sanitary toilet facilities SHALL be on the job site at all times during the construction process. All wood in contact with slab on grade floor slabs shall be of approved, durable and **treated** wood. Wood grade stakes **are not allowed** in footings or slab. Galvanized nails shall be used to attach regular wood to pressure treated wood.

***Vegetation and organic material (top soil) shall be removed prior to the placement of any fill material.**

The applicant listed below, certifies that all information in this application is correct and hereby agrees to have the subject buildings(s) erected or altered in accordance with the N. C. State Building Code(s) and any other applicable local code.

_____ Signature of Applicant	_____ Date
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For Office use Only

Zoning District _____ Flood Zone _____

Property is located inside: Flood Plain Yes/No

CAMA District Yes/No

- 1) 1 story ____ 1½ story ____ 2 story ____ 3 story ____
Siding: Brick veneer ____; vinyl/aluminum siding ____; wood ____; EIFS ____
- 2) Foundation: Continuous ____; Piers ____; Pier-curtain wall ____; Slab ____
Trench footing size ____ wide X ____ deep; concrete thickness: ____ inches
Pier footing size ____X____X____ deep; concrete thickness: ____ inches
Block size ____X____X____; Cap block size ____X____X____
Maximum pier height: _____ Total # rows of piers ; House width _____
Exterior girder size: ____X____X____ with a _____ clear span; Species _____
Interior girder size: ____X____X____ with a _____ clear span; Species ____
- 4) Crawl Space: Access door size ____X____; Ground vapor barrier: Yes___/No___
- 5) Floor system: Double sheathing _____ **OR** Tongue & Groove _____
- 1st floor joist size ____X____, _____ in. o.c. with a _____ clear span
Species: Southern Pine ____; Spruce/Fir ____; Lumber grade _____
 - 2nd floor joist size ____X____, _____ in. o.c. with a _____ clear span
Species: Southern Pine ____; Spruce/Fir ____; Lumber grade _____
 - 3rd floor joist size ____X____, _____ in. o.c. with a _____ clear span
Species: Southern Pine ____; Spruce/Fir ____; Lumber grade _____
- 6) Ceilings: joist size ____X____, _____ in. o.c. with a _____ clear span
Species: Southern Pine ____; Spruce/Fir ____; Lumber grade _____
Cathedral ceiling: YES___/NO___
- 7) Roof System: Slope ____/____ Type: Gable ____; Hip ____; Other ____
Trusses: YES___/NO___; _____ in. O.C. with a _____ clear span
Ridge Board size ____X____
Rafter size: ____X____, _____ in. O.C. with a _____ clear span
Species: Southern Pine ____; Spruce/Fir ____; Lumber grade _____

NOTE: If all framing members (floor, ceiling joist and rafters) are not of the same size, then all rooms shall be listed on the back of this sheet, specifying the above framing members sizes and clear spans for each room.

8) **ATTIC Area:** _____ sq. ft. Insulation: Batts _____ Blown-in _____

Access: Fixed stairs _____ Pull down _____ Access Hole _____, (_____ X _____)

_____ roof vents w/ _____ sq. in. net free area/vent

_____ soffit vents w/ _____ sq. in. net free area/vent

_____ linear ft. of continuous soffit ventilation, w/sq. in net free area

TOTAL net free area of attic ventilation _____ sq. in. provided

9) Structural steel I-Beam: Yes _____ No _____; Size: _____ X _____, _____ clear span

10) Garage: Yes: _____ No: _____ Door width _____: Header size _____, _____ X _____

Room over the garage: Yes _____ No _____; Proposed use: _____

Floor joist size _____ X _____, _____ in. o.c. with a _____ clear span

Species: Southern Pine _____; Spruce/Fir _____; Lumber grade _____

11) Type of heat: _____ Location of unit _____ # of returns _____

12) Type of water heater: Electric: _____; Gas: _____; Location: _____

13) Fireplace: Yes _____/No _____; Masonry: _____ or PreFab: _____

Fire place opening _____ X _____; flue liner size _____ X _____

Hearth Extension: 16 in. _____ 20 in. _____ Other _____ inches

14) Deck: Yes: _____/No: _____ Dimensions: _____ X _____ Height above grade: _____

Girder size: _____ X _____ with a _____ clear span between posts

Floor joist size _____ X _____, _____ in. o.c. with a _____ clear span

Species: Southern Pine _____; Spruce/Fir _____; Lumber grade _____

15) Detached Accessory Bldg. Yes: _____/No: _____ Dimensions: _____ X _____

Submitted by: _____

Date: _____

Reviewed by: _____

Date: _____